Statement of Fitness for Work
For social security or Statutory Sick Pay

Patient's name Mr, ~~Mrs, Miss, Ms~~ Shuqin Wang Zhu

I assessed your case on: 02 / 03 / 2026

and, because of the following condition(s): Mixed anxiety and depressive disorder

I advise you that:

- [X] you are not fit for work.
- [ ] ~~you may be fit for work taking account of the following advice:~~

If available, and with your employer's agreement, you may benefit from:

- [ ] ~~a phased return to work~~
- [ ] ~~amended duties~~
- [ ] ~~altered hours~~
- [ ] ~~workplace adaptations~~

Comments, including functional effects of your condition(s):

This will be the case for

or from 26 / 02 / 2026 **to** 12 / 03 / 2026

I ~~will~~/will not need to assess your fitness for work again at the end of this period.
(Please delete as applicable)

Issuer's name MOEDINE, Sabeena (Dr)

Issuer's profession Doctor

Date of statement 02 / 03 / 2026

Issuer's address
Evergreen Surgery
Evergreen Primary Care Centre, 1 Smythe Close
Edmonton Green, N9 0TW
Telephone: 02088878354

Unique ID: Med 3 04/22 711ECEDF-CBF5-4333-BBA4-8F2F6541DF0A

What your advice means

'You are not fit for work'
Your health condition means that you may not be able to work for the period shown. You can go back to work as soon as you feel able to and, with your employer's agreement, this may be before your fit note runs out.

'You may be fit for work'
You could go back to work with the support of your employer. Sometimes your employer cannot give you the support you need and if this happens your employer will treat this form as though you are '**not fit for work**'. You do not need to get another of these forms.

For more information please visit **www.gov.uk** and type '**fit note guidance for patients and employees**' into the search field. Fit note guidance for employers is also available.

Data from **page 1** of this form may be collected to learn about national patterns of sickness absence. Individuals will not be identified. Find out more at **www.gov.uk/dwp/fit-note-data**

Fill in the **Your details** section. You can ask someone to do this for you if you cannot fill in your details yourself.

Your details – Please use BLOCK CAPITALS

Surname Mr, ~~Mrs~~, ~~Miss~~, ~~Ms~~ ZHU

Other names SHUQIN WANG

Address 53 SOUTH EASTERN AVENUE
LONDON **Postcode** N9 9LX

Date of birth 30 / 12 / 1986 **Mobile**

NI number

What you need to do now

- **If you are employed**: Please show this form to your employer. You could get Statutory Sick Pay (SSP) which is paid by your employer. If your employer cannot pay you SSP they will give you form **SSP1** to claim benefits.
- **If you are self-employed**: You could claim benefits.
- **If you are already claiming benefits**: Please send this form to the office dealing with your claim.
- **If you need to make a claim to benefits**: Visit **www.gov.uk/browse/benefits** or phone **0800 328 5644** (8am to 6pm Monday to Friday). Textphone users call **0800 328 1344**.